

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101599214

FILING DATE

09-22-2000

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3	1			1		
4	3			1		
5	①			1		
6	①			1		
7	①			1		
8	①			1		
9	①			1		
10	①	①		1		
11	①			1		
12	①	①		1		
13	①			1		
14	①			1		
15	①			1		
16	①	①		1		
17	①			1		
18	①			1		
19	①			1		
20	①	①	1			
21	①			1		
22		①		1		
23	①	①		1		
24	①	①		1		
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49						
50						
TOTAL IND.	1		2			
TOTAL DEP.	25	←	24	←		←
TOTAL CLAIMS	26		26			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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96						
97						
98						
99						
100						
TOTAL IND.				↓		
TOTAL DEP.				←		←
TOTAL CLAIMS						←